24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48	
AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
House Majority PAC		
	C C00495028	
heck if 24-hour report 48-hour report New report Amends report filed on	/ = M / D = D / Y = Y = Y	
	of Public Distribution/Dissemination	
Gumbinner Davies & Simpson Communications	M M / D D / Y Y Y Y	
Mailing Address 2001 S St NW	09 28 2016	
Ste 301	arit	
City State Zip Code	10819.49	
Date	saction ID : VN7GDA49RK7 of Disbursement or Obligation	
Purpose of Expenditure Direct Mail - Estimate Category/ Type	M = M / D = D / Y = Y = Y	
Name of Federal Candidate Support Office Sough	nt: House District:	
Donald J. Trump	ent Senate State:	
Calendar Year-To-Date Per Election for Office Sought Disbursemer 2016		
	Other (specify)	
Gumbinner Davies & Simpson Communications	of Public Distribution/Dissemination	
Mailing Address 2001 S St NW	09 28 2016	
Ste 301	unt	
City State Zip Code	10819.49	
Washington DC 20009-1164 Transa	action ID : VN7GDA49RM5	
Purpose of Expenditure	of Disbursement or Obligation	
Direct Mail - Estimate		
Name of Federal Candidate Support Office Sough	ht: 🗶 House District: 26	
Carlos Curbelo Presid	lent Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought Disbursement 2016	_ , _	
Tot Election for Chice Godgitt	Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	21638.98	
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7	
(c) TOTAL Independent Expenditures		
	7	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Alixandria Lapp [Electronically Filed] Date 09	DDD / Y Y Y Y	
Signature [Electronically Filed] Date 09	30 2016	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
House Majority PAC		C C00495028
		<u> </u>
Check if 24-hour report X 48-hour report N New repo	rt Amends report file	d on M M M / D D / Y Y Y Y Y
Full Name of Payee Gumbinner Davies & Simpson Communications	s	Date of Public Distribution/Dissemination Date of Public Distribution/Dissemination 29 29 2016
Mailing Address 2001 S St NW		
Ste 301		Amount
City State	Zip Code	14265.33
Washington DC	20009-1164	Transaction ID : VN7GDA49RN3 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail - Estimate	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	Support Office	be Sought: House District: 08
Stewart Mills	X Oppose	President Senate State: MN
Calendar Year-To-Date Per Election for Office Sought	609863.69 Disk 2016	oursement For: Primary General Other (specify)
Full Name of Payee Cumbinger Davies & Simpson Communications		Date of Public Distribution/Dissemination
Gumbinner Davies & Simpson Communications		09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2001 S St NW		Amount
Ste 301	Zin Codo	24020.00
City State Washington DC	Zip Code 20009-1164	21638.98 Transaction ID: VN7GDA49RR7
Purpose of Expenditure		Date of Disbursement or Obligation
Direct Mail - Estimate	Category/ Type	M - M / D - D / Y - Y - Y - Y
Name of Federal Candidate	Support Office	ce Sought: X House District: 26
Carlos Curbelo	X Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	32458.47 Dist 201	oursement For: Primary X General 6 Other (specify) ▶
_ !	l	
(a) SUBTOTAL of Itemized Independent Expenditures		35904.31
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······································	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
	cally Filed] Date	09 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

Schedule E)	LINDLINI EXPLINDI	TOTILS	⊢	PAGE 3 OF 7 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDE	NTIFICATION NUMBER ▼
House Majority PAC			C	:00495028
Check if 24-hour report X 48-hour re	eport New repo	ort Amends repo	rt filed on	D = D / Y = Y = Y
Full Name of Payee			Date of Public	Distribution/Dissemination
JVA Campaigns			M M / 09	29 / 2016
Mailing Address 240 N 5th St Ste 360			Amount	
City	State	Zip Code		20040.42
Columbus	OH	43215-2600		26618.13 D: VN7GDA44T28 sement or Obligation
Purpose of Expenditure Direct Mail - Estimate		Category/ Type	Man /	
Name of Federal Candidate		Support	Office Sought:	House District: 03
David Young		X Oppose	President	Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		26618.13	Disbursement For: [2016 Other (spe	Primary ✗ General cify) ▶
Full Name of Payee	-		Date of Public	Distribution/Dissemination
Mack-Sumner Communication	s, LLC		/ 09	28 2016
Mailing Address 2001 N Beauregard St			Amount	
Ste 420			Amount	
City	State	Zip Code		23044.46
Alexandria	VA	22311-1750		: VN7GDA44T36 sement or Obligation
Purpose of Expenditure Direct Mail - Estimate		Category/ Type	M = M /	D D / Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District: 25
Steve Knight		X Oppose	President	Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		83228.88	Disbursement For: 2016 Other (spe	Primary X General ecify) ▶
(a) SUBTOTAL of Itemized Independent E	expenditures		•	49662.59
(b) SUBTOTAL of Unitemized Independen	t Expenditures		.	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Alixandria Lapp	[Electron	ically Filed] Date	09 / 30	2016
J.g.iataio				

Schedule E)	ones	PAGE 4 OF 7 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
House Majority PAC		C C00495028
Check if 24-hour report X 48-hour report X New re	port Amends report f	led on Mam / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
Mack-Sumner Communications, LLC		09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2001 N Beauregard St		Amount
Ste 420		
City State	Zip Code	21129.68
Alexandria VA	22311-1750	Transaction ID: VN7GDA44T44 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail - Estimate	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	Support O	ffice Sought:
John Mica	X Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		sbursement For: Primary X General 116 Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
Mack-Sumner Communications, LLC		09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2001 N Beauregard St		Amount
Ste 420		Amount
City State	Zip Code	18569.98
Alexandria VA	22311-1750	Transaction ID : VN7GDA44T51 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail - Estimate	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	🗶 Support O	ffice Sought: 🗶 House District:25
Bryan Caforio	Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		isbursement For: Primary General O16 Other (specify)
-		
(a) SUBTOTAL of Itemized Independent Expenditures	·····	39699.66
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	· · · · · · · · · · · · · · · · · · ·	
Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
	onically Filed] Date	09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

Schedule E)	ADLINI EXPEND	ITORLS		PAGE 5 OF 7 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			F	EC IDENTIFICATION NUMBER ▼
House Majority PAC			ĺ	C C00495028
Check if 24-hour report 🗶 48-hour report	ort New rep	ort Amends repo	ort filed on	M / D = D / Y = Y = Y = Y
Full Name of Payee Murphy Vogel Askew Reilly LL	_C		M	Public Distribution/Dissemination
Mailing Address 1199 N Fairfax St			Amount	9 28 2016
Ste 220				
City Alexandria	State VA	Zip Code 22314-1437		9298.52 ction ID: VN7GDA479X8 Disbursement or Obligation
Purpose of Expenditure Media Production Costs - Estimate		Category/ Type		M / D D / Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	₩ House District: 24
Justin Fareed		X Oppose	Presider	Dietriet CA
Calendar Year-To-Date Per Election for Office Sought		252447.12	Disbursement 2016 Oth	For: Primary x General er (specify) ▶
Full Name of Payee			Date of	Public Distribution/Dissemination
Shorr Johnson Magnus				09 / 29 / 2016
Mailing Address 100 N 20th St			Amoun	t
Ste 201	2			
City Philadelphia	State PA	Zip Code 19103-1454		11518.75 tion ID : VN7GDA49RJ0 Disbursement or Obligation
Purpose of Expenditure Media Production Costs - Estimate		Category/ Type		M / D D / Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	¥ House District: 22
Claudia Tenney		x Oppose	Presider	Senate State: NY
Calendar Year-To-Date Per Election for Office Sought		1212511.84	Disbursement 2016 Oth	For: Primary ★ General ner (specify) ★
(a) SUBTOTAL of Itemized Independent Exp	enditures			20817.27
(b) SUBTOTAL of Unitemized Independent E	Expenditures		•	T. I. T. I. T. I. T. I.
(c) TOTAL Independent Expenditures			· •	7 7 7
Under penalty of perjury I certify that the inc with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized			
Alixandria Lapp	[Electron	ically Filed] Date	e 09	30 / 2016
Signature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
House Majority PAC	C C00495028
	<u> </u>
Check if 24-hour report 48-hour report New report Amends	report filed on/
Full Name of Payee The Baughman Company, Inc.	Date of Public Distribution/Dissemination
, , ,	09 / 29 / 2016
Mailing Address 1592 Union St	Amount
Ste 401	
City State Zip Code San Francisco CA 94123-4505	14227.51 Transaction ID : VN7GDA49RT3
Purpose of Expanditure	Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail - Estimate Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Suppor	rt Office Sought: X House District: 07
Scott Jones Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 118827.92	Disbursement For: Primary General 2016
Full Name of Payee	Date of Public Distribution/Dissemination
The Baughman Company, Inc.	09 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1592 Union St	
Ste 401	Amount
City State Zip Code	12589.87
San Francisco CA 94123-4505	Transaction ID: VN7GDA49RV1 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail - Estimate Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Suppor	rt Office Sought: 🗶 House District:07
Scott Jones X Oppos	
Calendar Year-To-Date	Disbursement For: Primary K General
Per Election for Office Sought 118827.92	2016 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	26817.38
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	>
Under penalty of perjury I certify that the independent expenditures reported herein w with, or at the request or suggestion of, any candidate or authorized committee or age party committee) any political party committee or its agent.	
	Date 09 30 2016
Signature	

Schedule E)	PAGE 7 OF 7 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
House Majority PAC	C C00495028	
Check if 24-hour report 48-hour report New report Amends report filed on	M / D D / Y Y Y Y Y	
	Public Distribution/Dissemination	
	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 730 North Franklin Street Amount	t	
Suite 404		
City State Zip Code	21867.22	
Date of	ction ID: VN7GDA47A36 Disbursement or Obligation	
Purpose of Expenditure Direct Mail - Estimate Category/ Type	M / D D / Y Y Y Y	
Name of Federal Candidate X Support Office Sought:	¥ House District: 22	
Kim Myers Oppose Presider	NV	
Calendar Year-To-Date Per Election for Office Sought Disbursement 2016 Oth	For: Primary General Per (specify) ■	
	f Public Distribution/Dissemination	
	09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 730 North Franklin Street Amoun	t	
Suite 404		
City State Zip Code	23938.80	
Date of	tion ID: VN7GDA44T69 f Disbursement or Obligation	
Purpose of Expenditure Direct Mail - Estimate Category/ Type	M / D D / Y Y Y Y Y	
Name of Federal Candidate Support Office Sought:	: X House District: 05	
Scott Garrett Presider	NI	
Calendar Year-To-Date Per Election for Office Sought Disbursement 2016 Ott	For: Primary X General her (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures	45806.02	
(b) SUBTOTAL of Unitemized Independent Expenditures	7	
(c) TOTAL Independent Expenditures	240346.21	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Alixandria Lapp [Electronically Filed] Date O9	30 / 2016	
Signature		